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SERIAL NUMBER 10/625,937	FILING OR 371(c) DATE 07/24/2003 RULE	CLASS 606	GROUP ART UNIT 3731	ATTORNEY DOCKET NO. 0156-2004US01
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APPLICANTS

Michael Lebner, Wellesley Hills, MA;

** CONTINUING DATA ****

none

** FOREIGN APPLICATIONS ****

none 9/15/06 DE

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

** 03/17/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no		
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after		
Verified and Acknowledged	Allowance Examiner's Signature Initials		
STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
MA	3	34	2

ADDRESS

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 One New Hampshire Avenue
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TITLE

Device for laceration or incision closure

FILING FEE RECEIVED 501	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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